

# FORMAL COMPLAINT

ORIGINAL  
ILLINOIS COMMERCE COMMISSION

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OFFICIAL FILE  
ILLINOIS COMMERCE COMMISSION

Illinois Commerce Commission  
527 East Capitol Avenue  
Springfield, Illinois 62701

CHIEF CLERK'S OFFICE

For Commission Use Only:

Case 02-0202

Regarding a complaint

by Karen Johnson  
(Person making the complaint)

against Nicor Gas Company  
(Utility name)

as to Past Account, Accrued late charges and Deposit Request  
(Reason for complaint)

in Woodridge Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 5 Cherry Tree Ct, Woodridge, IL 60517

The service address that I am complaining about is Same as above

My home telephone number is 630 544-0535

Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at 630 544-0535

Nicor Gas Company (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.  
(Full name of utility company)

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with your complaint.

N/A

Have you contacted the Consumer Affairs Division of the Illinois Commerce Commission about this complaint? ☒ Yes ☐ No

Has your complaint filed with that office been closed?

Yes ☒ ☐ No

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.

In January of this year, my current Nicor account was merged with an account belonging to a Karen Johnson of Downers Grove, Ill., who had an out standing balance. After providing information to Nicor regarding my identification, Nicor has yet to restore my account and insist the prior is mine. Please clearly state what you want the Commission to do in this case. Review the identification and residential material which the prior Nicor account isn't mine.

Date: 3/11/2002  
(Month, day, and year)

Complainant's signature Karen Johnson

If you will be represented by an attorney, please give the attorney's name, address, and telephone number.

You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).

#### VERIFICATION

A notary public must watch you fill out this part of the form.

I, Karen Johnson, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

[Signature]  
(Signature)

Subscribed and sworn/affirmed to before me this 12 day of March, 2002.

[Signature]  
Notary Public, Illinois

#### NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.

cc207/07

